



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of) Group Art Unit: 1600
Jeffry W. Kreamer)
Serial No. 08/071,052) Examiner: Theodore J. Criares
Filed: June 4, 1993)
For: ASPIRIN AND VITAMIN AND/OR)
TRACE ELEMENT)
COMPOSITIONS FOR THE)
AMELIORATION AND)
TREATMENT OF VASCULAR)
DISEASE)

RECEIVED
MAR 06 2001
TECHNICOLOR LIBRARIES

251 D
0098
3140

AMENDMENT UNDER 37 C.F.R. § 1.111

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

In the matter of the above-identified application for United States Letters Patent and in response to the Office Action mailed November 30, 2000, kindly enter the following amendments, under 37 C.F.R. § 1.111 and consider the following remarks relative to reconsideration of the present application.

AMENDMENTS

In the Specification:

After the title, kindly insert the following as a separate paragraph prior to the paragraph identified as the background of the invention:



GAU 1600
1617

Please type a plus sign (+) inside this box →

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission **3**

Application Number **08/071,052**

Application Date **June 4, 1993**

First Named Inventor **Jeffry W. Kreamer**

Group Art Unit **1600**

Examiner Name **Theodore J. Criares**

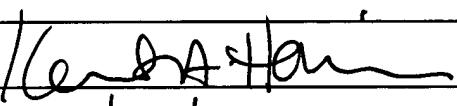
Attorney Docket Number **4673120/4650**

RECEIVED
TECH CENTER 1600/PAS
MAR 06 2001

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks Deposit Account Authorization: In the event no specific fee has been authorized above or if a check is detached or misplaced, the Commissioner is authorized to charge the TOTAL DUE to our deposit account No. 12-2250. Any adjustment in the TOTAL DUE should be made to our deposit account No. 12-2250.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kent A. Herink, Esq., Davis, Brown, Koehn, Shors & Roberts, P.C.	
Signature		
Date	2/28/01	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date **2/28/01**

Typed or printed name	Kristen T. McKern	Kent A. Herink
Signature		Date 2/28/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.